STATE OF IOWA
MASTER AGREEMENT
Contract Declaration and Execution

MA 005 **21037**

EFFECTIVE BEGIN DATE: 09-01-2020
EXPIRATION DATE: 08-30-2021

VENDOR:
PREMIER BIOTECH

00003050868

PO Box 160
Hopkins, MN 55343-0160

VENDOR CONTACT:
Sam Wilczyk
PHONE: 612-300-3134 **EXT:**
EMAIL: swilczyk@premierbiotech.com

ISSUER:
David Kundid
PHONE: 515-745-2796
EMAIL: david.kundid@iowa.gov

FOB: FOB Dest, Freight Prepaid

Contract For: Drug Testing Kits and Laboratory Confirmation Services

The parties agree to comply with the terms and conditions on the following attachments which are by this reference made a part of the Agreement.

Attachments are on file with the Department of Administrative Service - Central Procurement.

Attachment 1: Competitive Solicitation RFB0220005045

Attachment 2: Contractor's Response to Competitive Solicitation RFB0220005045 (except for any contractor objection or amendment to the Competitive Solicitation Document requirements that the State has not explicitly agreed to in writing)

Attachment 3: Contractor's Cost (final pricing documentation) Response to competitive solicitation document RFB0220005045.

Delivery Time: 5 days

Contact:
Sam Wilczyk
612-300-3134
swilczyk@premierbiotech.com

RENEWAL OPTIONS

FROM	08-31-2021	**TO**	08-30-2022
FROM	08-31-2022	**TO**	08-30-2023
FROM	08-31-2023	**TO**	08-30-2024

AUTHORIZED DEPARTMENT

ALL
SUB Other Governmental Entities

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
1	1.00000	EA	19348	$ 21.000000 $ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)
Urine Laboratory Confirmation

Urine Laboratory Confirmation

2	1.00000	EA	19348	$ 90.000000 $ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)
QED Saliva Alcohol Screen

QED Saliva Alcohol Screen

10 Per Box

3	1.00000	BOX	19348	$ 12.500000 $ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)
Single Cassette Dip FYL

Single Cassette Dip FYL
25 Per Box

4	1.00000	BOX	19348	$ 50.000000 $ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)
Single Cassette Dip K3

Single Cassette Dip K3
25 Per Box

5	1.00000	BOX	19348	$ 75.000000 $ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)
Single Cassette Dip Neurontin

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
			Single Cassette Dip Neurontin 25 Per Box	
6	1.00000	BOX	19348	$ 16.250000 $ 0.000000
REF DOC:			REF VNDR LN: REF COMM LN: REF TYPE: FINAL	
			Drug Assay and Screening Test Kits (Except Radioimmunoassay) **Single Cassette Dip Tobacco** Single Cassette Dip Tobacco 25 Per Box	
7	1.00000	BOX	19348	$ 28.750000 $ 0.000000
REF DOC:			REF VNDR LN: REF COMM LN: REF TYPE: FINAL	
			Drug Assay and Screening Test Kits (Except Radioimmunoassay) **6 Panel Dip Cassette** **COC THC OPI AMP MET OXY** 6 Panel Dip Cassette COC THC OPI AMP MET OXY 25 Per Box	
8	1.00000	BOX	19348	$ 28.750000 $ 0.000000
REF DOC:			REF VNDR LN: REF COMM LN: REF TYPE: FINAL	
			Drug Assay and Screening Test Kits (Except Radioimmunoassay) **10 Panel Dip Cassette** **BAR BZO MTD MDMA** 10 Panel Dip Cassette COC THC OPI AMP MET PCP BAR BZO MTD MDMA 25 Per Box	
9	1.00000	BOX	19348	$ 61.250000 $ 0.000000
REF DOC:			REF VNDR LN: REF COMM LN: REF TYPE: FINAL	
			Drug Assay and Screening Test Kits (Except Radioimmunoassay) **12 Panel Dip Cassette** **COC THC OPI AMP MET BAR BZO MDMA** 12 Panel Dip Cassette COC THC OPI AMP MET BAR BZO MDMA MTD OXY PPX	

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE

25 Per Box

10 **1.00000** **BOX** **19348** **$ 75.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

10 Panel Cup
COC THC AMP MET OPI BAR BZO MTD OXY PCP

10 Panel Cup
COC THC AMP MET OPI BAR BZO MTD OXY PCP

25 Per Box

11 **1.00000** **BOX** **19348** **$ 87.500000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

10 Panel Cup
COC THC AMP MET OPI BAR BZO MTD OXY PCP ALC

10 Panel Cup
COC THC AMP MET OPI BAR BZO MTD OXY PCP plus ALC

25 Per Box

12 **1.00000** **BOX** **19348** **$ 80.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

11 Panel Cup
COC THC AMP MET OPI K2 BZO MDMA MTD OXY BAR

11 Panel Cup
COC THC AMP MET OPI K2 BZO MDMA MTD OXY BAR

25 Per Box

13 **1.00000** **BOX** **19348** **$ 85.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Cup
COC THC AMP MET OPI BUP BZO K2 MDMA MTD OXY

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE

12 Panel Cup
COC THC AMP MET OPI BUP BZO K2 MDMA MTD OXY BAR

25 Per Box

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14 **1.00000** **BOX** **19348** **$ 90.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Cup
COC THC AMP MET OPI BUP BZO MDMA MTD OXY PCP

12 Panel Cup
COC THC AMP MET OPI BUP BZO MDMA MTD OXY PCP PPX w/ Adulterants

25 Per Box

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15 **1.00000** **BOX** **19348** **$ 90.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Cup
COC THC AMP MET OPI300 BUP BZO MDMA MTD OXY

12 Panel Cup
COC THC AMP MET OPI300 BUP BZO MDMA MTD OXY PCP BAR w/ Adulterants

25 Per Box

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16 **1.00000** **BOX** **19348** **$ 123.750000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

13 Panel Cup
THC COC150 OPI300 AMP500 MET500 BZO BAR BUP

13 Panel Cup
THC COC150 OPI300 AMP500 MET500 BZO BAR BUP ETG500 FYL20 TRA100 K2

25 Per Box

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17 **1.00000** **BOX** **19348** **$ 187.500000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

10 Panel Swab
COC THC AMP MET OPI BAR BZO MTD OXY PCP

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE

10 Panel Swab
COC THC AMP MET OPI BAR BZO MTD OXY PCP plus ALC

25 Per Box

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18 1.00000 BOX 19348 **$ 200.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

11 Panel Swab
COC THC AMP MET OPI K2 BZO MDMA MTD OXY PCP

11 Panel Swab
COC THC AMP MET OPI K2 BZO MDMA MTD OXY PCP

25 Per Box

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19 1.00000 BOX 19348 **$ 212.500000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Swab
COC THC AMP MET OPI BUP BZO K2 MDMA MTD OXY

12 Panel Swab
COC THC AMP MET OPI BUP BZO K2 MDMA MTD OXY BAR

25 Per Box

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20 1.00000 BOX 19348 **$ 212.500000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Swab
COC THC AMP MET OPI BUP BZO MDMA MTD OXY PCP

12 Panel Swab
COC THC AMP MET OPI BUP BZO MDMA MTD OXY PCP PPX w/ Adulterants

25 Per Box

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21 1.00000 BOX 19348 **$ 212.500000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

12 Panel Swab
COC THC AMP MET OPI300 BUP BZO MDMA MTD OXY

12 Panel Swab
COC THC AMP MET OPI300 BUP BZO MDMA MTD OXY PCP BAR w/ Adulterants

25 Per Box

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22 **1.00000** **BOX** **19348** **$ 225.000000**

$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: **FINAL**

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

13 Panel Swab
THC COC150 OPI300 AMP500 MET500 BZO BAR OXY

13 Panel Swab
THC COC150 OPI300 AMP500 MET500 BZO BAR OXY BUP ETG500 FYL20 TRA100 K2

25 Per Box

Fields of Opportunities

STATE OF IOWA
MASTER AGREEMENT
Contract Declaration and Execution

MA 005 **21037**

EFFECTIVE BEGIN DATE: 09-01-2020
EXPIRATION DATE: 08-30-2021

TERMS AND CONDITIONS

Goods Effective 1 May 16

The parties agree to comply with the terms and conditions on the following web site which are by this reference made a part of the Agreement. General Terms and Conditions for goods contracts are posted at: https://das.iowa.gov/sites/default/files/procurement/pdf/050116%20terms%20goods.pdf

THIS MASTER AGREEMENT IS EFFECTIVE AS OF THE LATEST DATE SHOWN IN "EFFECTIVE BEGIN DATE" IN THE UPPER RIGHT HAND CORNER OR THE DATE BELOW SIGNED BY THE STATE OF IOWA.

CONTRACTOR	STATE OF IOWA
CONTRACTOR'S NAME (If other than an individual, state whether a corp, partnership, etc. Premier Biotech, Inc.	**AGENCY NAME** DAS Central Procurement and Fleet Enterprise
BY (Authorized Signature) **Date Signed** 8/14/20	**BY (Authorized Signature)** **Date Signed** David Kundid 8/17/2020
Printed Name and Title of Person Signing Sam Wilczyk-Director of Government Solutions	**Printed Name and Title of Person Signing** David Kundid - Purchasing Agent III
Address 723 Kasota Ave SE Minneapolis, MN 55414	**Address** Iowa Dept. of Administrative Services Hoover State Office Building, Level 3 1305 East Walnut Street Des Moines, IA 50319